

County: Polk
WILLOW RIDGE HEALTHCARE
400 DERONDA STREET

Facility ID: 2440

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AMERY 54001 Phone:(715) 268-8171
Operated from 1/1 To 12/31 Days of Operation: 365
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/02): 69
Total Licensed Bed Capacity (12/31/02): 86
Number of Residents on 12/31/02: 68

Ownership: Limited Liability Company
Highest Level License: Skilled
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 64

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/02)				Length of Stay (12/31/02)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		36.8
Supp. Home Care-Personal Care	No	-----		-----		1 - 4 Years		41.2
Supp. Home Care-Household Services	No	Developmental Disabilities	4.4	Under 65	2.9	More Than 4 Years		22.1
Day Services	No	Mental Illness (Org./Psy)	27.9	65 - 74	5.9			-----
Respite Care	No	Mental Illness (Other)	2.9	75 - 84	26.5			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	52.9	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	1.5	95 & Over	11.8	Full-Time Equivalent		
Congregate Meals	No	Cancer	1.5		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	1.5		100.0	(12/31/02)		
Other Meals	No	Cardiovascular	20.6	65 & Over	97.1	-----		
Transportation	No	Cerebrovascular	20.6		-----	RNs		10.3
Referral Service	No	Diabetes	11.8	Sex	%	LPNs		6.9
Other Services	No	Respiratory	4.4	-----		Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	2.9	Male	23.5	Aides, & Orderlies		
Mentally Ill	No		-----	Female	76.5			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	Yes				100.0			

Method of Reimbursement

			Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care			Total	%
Level of Care			No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Resi- dents	Of All
Int. Skilled Care	0	0.0	0			1	2.6	128	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	1.5
Skilled Care	4	100.0	283			31	81.6	110	0	0.0	0	23	88.5	130	0	0.0	0	0	0.0	0	58	85.3
Intermediate	---	---	---			5	13.2	92	0	0.0	0	1	3.8	130	0	0.0	0	0	0.0	0	6	8.8
Limited Care	---	---	---			0	0.0	0	0	0.0	0	1	3.8	95	0	0.0	0	0	0.0	0	1	1.5
Personal Care	---	---	---			0	0.0	0	0	0.0	0	1	3.8	76	0	0.0	0	0	0.0	0	1	1.5
Residential Care	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---			1	2.6	161	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	1.5
Traumatic Brain Inj	0	0.0	0			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	4	100.0				38	100.0		0	0.0		26	100.0		0	0.0		0	0.0		68	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02							

Percent Admissions from:		Activities of		% Needing		% Totally		Total	
				Assistance of		Dependent		Number of	
				One Or Two Staff				Residents	
Private Home/No Home Health	13.5	Daily Living (ADL)	Independent						
Private Home/With Home Health	5.4	Bathing	4.4	79.4	16.2			68	
Other Nursing Homes	5.4	Dressing	20.6	69.1	10.3			68	
Acute Care Hospitals	70.3	Transferring	33.8	57.4	8.8			68	
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	27.9	61.8	10.3			68	
Rehabilitation Hospitals	0.0	Eating	69.1	23.5	7.4			68	
Other Locations	5.4	*****							
Total Number of Admissions	74	Continence		%	Special Treatments			%	
Percent Discharges To:		Indwelling Or External Catheter	2.9		Receiving Respiratory Care			10.3	
Private Home/No Home Health	0.0	Occ/Freq. Incontinent of Bladder	57.4		Receiving Tracheostomy Care			0.0	
Private Home/With Home Health	44.6	Occ/Freq. Incontinent of Bowel	16.2		Receiving Suctioning			0.0	
Other Nursing Homes	10.8				Receiving Ostomy Care			4.4	
Acute Care Hospitals	24.6	Mobility			Receiving Tube Feeding			1.5	
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	1.5		Receiving Mechanically Altered Diets			26.5	
Rehabilitation Hospitals	0.0								
Other Locations	0.0	Skin Care			Other Resident Characteristics				
Deaths	20.0	With Pressure Sores	4.4		Have Advance Directives			77.9	
Total Number of Discharges		With Rashes	0.0		Medications				
(Including Deaths)	65				Receiving Psychoactive Drugs			44.1	

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities									

	This	Ownership:		Bed Size:		Licensure:		All	
	Facility	Proprietary		50-99		Skilled		Facilities	
	%	Peer Group		Peer Group		Peer Group		% Ratio	
		%	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	73.6	80.0	0.92	83.5	0.88	83.3	0.88	85.1	0.86
Current Residents from In-County	85.3	73.3	1.16	72.9	1.17	75.8	1.12	76.6	1.11
Admissions from In-County, Still Residing	31.1	19.2	1.62	22.2	1.40	22.0	1.41	20.3	1.53
Admissions/Average Daily Census	115.6	136.0	0.85	110.2	1.05	118.1	0.98	133.4	0.87
Discharges/Average Daily Census	101.6	138.5	0.73	112.5	0.90	120.6	0.84	135.3	0.75
Discharges To Private Residence/Average Daily Census	45.3	59.1	0.77	44.5	1.02	49.9	0.91	56.6	0.80
Residents Receiving Skilled Care	86.8	93.4	0.93	93.5	0.93	93.5	0.93	86.3	1.01
Residents Aged 65 and Older	97.1	95.9	1.01	93.5	1.04	93.8	1.03	87.7	1.11
Title 19 (Medicaid) Funded Residents	55.9	73.2	0.76	67.1	0.83	70.5	0.79	67.5	0.83
Private Pay Funded Residents	38.2	16.8	2.27	21.5	1.78	19.3	1.98	21.0	1.82
Developmentally Disabled Residents	4.4	0.9	5.09	0.7	5.92	0.7	6.11	7.1	0.62
Mentally Ill Residents	30.9	33.7	0.92	39.0	0.79	37.7	0.82	33.3	0.93
General Medical Service Residents	2.9	19.3	0.15	17.6	0.17	18.1	0.16	20.5	0.14
Impaired ADL (Mean)	40.0	46.1	0.87	46.9	0.85	47.5	0.84	49.3	0.81
Psychological Problems	44.1	51.2	0.86	54.6	0.81	52.9	0.83	54.0	0.82
Nursing Care Required (Mean)	5.9	7.2	0.82	6.8	0.87	6.8	0.87	7.2	0.82